

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Florida Freedom PAC

ADDRESS (number and street) ▼

8330 Biscayne Blvd., Ste. 1

☐ Check if different than previously reported. (ACC)

Miami

FL

33138

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00521013

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

FL

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gihan Perera

Signature of Treasurer

Gihan Perera

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Florida Freedom PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 10 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y  
 10 / 17 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	1023537.38	
(c) Total Receipts (from Line 19) .....	2188584.61	5897524.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3212121.99	5897524.71
7. Total Disbursements (from Line 31) .....	1601038.95	4286441.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1611083.04	1611083.04
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	171215.22	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Florida Freedom PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10		01		2012

To:

M M	/	D D	/	Y Y Y Y Y Y
10		17		2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

4465.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

4465.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2188564.61

5893039.71

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

2188564.61

5897504.71

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

20.00

20.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2188584.61

5897524.71

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

2188584.61

5897524.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	163219.38	1246025.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	163219.38	1246025.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	1424425.97	3018641.81
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	13393.60	21773.91
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1601038.95	4286441.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1601038.95	4286441.67

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2188564.61	5897504.71
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2188564.61	5897504.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	163219.38	1246025.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	20.00	20.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	163199.38	1246005.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 222

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL**

Mailing Address 1800 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5893039.71

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	12	/	2012

Transaction ID : C4513324

Amount of Each Receipt this Period

927267.00

Full Name (Last, First, Middle Initial)

**B. SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL**

Mailing Address 1800 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5893039.71

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	01	/	2012

Transaction ID : C4521454

Amount of Each Receipt this Period

1261297.61

\* In-Kind: In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2188564.61

TOTAL This Period (last page this line number only)..... ►

2188564.61

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

**A. 1Miami, Inc.**

Mailing Address 5725 Corporate Way

City	State	Zip Code
West Palm Beach	FL	33407

Purpose of Disbursement
Reimbursement for Food Purchase

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341720

Amount of Each Disbursement this Period

4186.00

Full Name (Last, First, Middle Initial)

### B. Amrry Gonzalez

Mailing Address 1235 SW 6 Street #1

City	State	Zip Code
Miami	FL	33135

Purpose of Disbursement	Salary

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D341730

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

### C. Atlantic Litho

Mailing Address 1239 N Flagler Dr

City	State	Zip Code
Fort Lauderdale	FL	33304

Purpose of Disbursement	Printing

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Transaction ID : D341820

Amount of Each Disbursement this Period

9600.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

14586.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Polnet Communications

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10' with 4 segments lit. The second display shows '12' with 5 segments lit. The third display shows '2012' with 10 segments lit.

Transaction ID : D341830

Category/  
Type

5020.00

### B. Petty Cash

Transaction ID : D341630

Category/  
Type

200.00

### C. Chevron

Transaction ID : D341640

Category/  
Type

8400.00

13620.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 222

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: 

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

State: District:

Disbursement For: 

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

Transaction ID : D341650

Amount of Each Disbursement this Period

2024.00
---------

Full Name (Last, First, Middle Initial)

**B. Publix**

Mailing Address 9050 Biscayne Blvd

City	State	Zip Code
Miami Shores	FL	33138

Purpose of Disbursement  
Food and Beverage

Candidate Name

Office Sought: 

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

State: District:

Disbursement For: 

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

Transaction ID : D341660

Amount of Each Disbursement this Period

49.18
-------

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 3636 Executive Center Drive #100

City	State	Zip Code
Austin	TX	78731

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: 

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

State: District:

Disbursement For: 

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Transaction ID : D341670

Amount of Each Disbursement this Period

11234.89
----------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13308.07
----------

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Walgreens

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

### Purpose of Disbursement Pre-Paid Debit Cards

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341681

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	325.00
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	100.00

Full Name (Last, First, Middle Initial)

### B. Fedex

Mailing Address 1144 West Griffin Road

City	State	Zip Code
Lakeland	FL	33805

Purpose of Disbursement
Shipping Services

---

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341731

Amount of Each Disbursement this Period

174.29

Full Name (Last, First, Middle Initial)

### C. Fedex

Mailing Address 1144 West Griffin Road

City	State	Zip Code
Lakeland	FL	33805

Purpose of Disbursement	
Shipping Services	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Three digital displays showing the date 10/17/2012 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '17' with 'D' indicators above it. The third display shows '2012' with 'Y' indicators above it.

Transaction ID : D341741

Amount of Each Disbursement this Period

252.20

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

751.49

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. David Egalite

Mailing Address 10355 NW 12 Ave

City	State	Zip Code
Miami	FL	33150

Purpose of Disbursement	Musical Entertainment for Event
-------------------------	---------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

The image shows three 10-pin D-sub connectors. The first connector is labeled 'M10' and has two pins labeled 'M'. The second connector is labeled 'D03' and has two pins labeled 'D'. The third connector is labeled 'Y2012' and has four pins labeled 'Y'.

Transaction ID : D341821

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B. Amrry Gonzalez

Mailing Address 1235 SW 6 Street #1

City	State	Zip Code
Miami	FL	33135

Purpose of Disbursement	Salary

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341721

Amount of Each Disbursement this Period

800.00

### C. Petty Cash

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	Petty Cash

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D341631

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 222

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City Miami    State FL    Zip Code 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2012

Transaction ID : D341641

Amount of Each Disbursement this Period

2242.00

Full Name (Last, First, Middle Initial)

**B. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City Miami    State FL    Zip Code 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : D341651

Amount of Each Disbursement this Period

662.00

Full Name (Last, First, Middle Initial)

**C. Regions Bank**

Mailing Address 6013 Northwest 7th Avenue

City Miami    State FL    Zip Code 33127

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : D341671

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2924.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 222

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

## **A. Florida Consumer Action Network**

Mailing Address 3006 W Kennedy Blvd, Suite B

City Tampa State FL Zip Code 33609

Purpose of Disbursement  
Political Strategy Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341742

Amount of Each Disbursement this Period

2200.00

Full Name (Last, First, Middle Initial)

## **B. Decision Point Strategies**

Mailing Address 1133 19th St NW  
Ste 300

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Direct Mailing Services - No Express Advocacy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 16 / 2012

Transaction ID : D341822

Amount of Each Disbursement this Period

21115.00

Full Name (Last, First, Middle Initial)

## **C. Univision Communications Inc**

Mailing Address Glenpointe Centre West 500 Frank W  
FI 6

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement  
GOTV Radio Ad Buy - No Express Advocacy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : D341832

Amount of Each Disbursement this Period

10020.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33335.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Walgreens

Date of Disbursement

MM / DD / YYYY

Transaction ID : D341642


Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

894.00

### B. Regions Bank

Date of Disbursement

Transaction ID : D341672

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

### C. Petty Cash

Date of Disbursement

M M / D D / Y Y Y Y  
10 17 2012

Transaction ID : D341632


Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

200.00

1114.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City Miami    State FL    Zip Code 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341652

Amount of Each Disbursement this Period

2378.00

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 3101 N. Miami Ave

City Miami    State FL    Zip Code 33127

Purpose of Disbursement  
Telephone Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2012

Transaction ID : D341662

Amount of Each Disbursement this Period

107.00

Full Name (Last, First, Middle Initial)

**C. WYUU**Mailing Address 9721 Executive Center Dr  
Ste 200

City Saint Petersburg    State FL    Zip Code 33702

Purpose of Disbursement  
GOTV Radio Ad Buy - No Express Advocacy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : D341833

Amount of Each Disbursement this Period

5020.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7505.00





<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Hotels.com

Date of Disbursement

Mailing Address 10440 North Central Expressway  
Suite 400

The image shows three different connector types: M10 (a 10-pin D-sub connector), D09 (a 9-pin D-sub connector), and Y2012 (a 20-pin micro-D connector).

City	State	Zip Code
Dallas	TX	75231

Transaction ID : D341663

Purpose of Disbursement
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

110.14

Full Name (Last, First, Middle Initial)

### B. Regions Bank

Date of Disbursement

Mailing Address 6013 Northwest 7th Avenue

City	State	Zip Code
Miami	FL	33127

Transaction ID : D341673

Purpose of Disbursement	Bank Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Full Name (Last, First, Middle Initial)

### C. Fedex

Date of Disbursement

Mailing Address 1144 West Griffin Road



City	State	Zip Code
Lakeland	FL	33805

Transaction ID : D341724

Purpose of Disbursement
Shipping Services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

274.34

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

404.48

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. No Limit Event Rentals

Diagram showing three different connector types: 10-pin, 11-pin, and 2012-pin.

Category/  
Type

State:  District:

## B. Zephyrhills

Category/  
Type

State:  District:

### C. Inside the Box Catering

Category/  
Type

State:  District:

990.97

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City Miami      State FL      Zip Code 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2012

Transaction ID : D341624

Amount of Each Disbursement this Period

7020.00

Full Name (Last, First, Middle Initial)

**B. Petty Cash**

Mailing Address

City      State      Zip Code

Purpose of Disbursement  
Petty Cash

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2012

Transaction ID : D341634

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City Miami      State FL      Zip Code 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2012

Transaction ID : D341644

Amount of Each Disbursement this Period

562.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7782.00



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Petty Cash

The image shows three different connector types: M10 (a 10-pin D-sub connector), D09 (a 9-pin D-sub connector), and Y2012 (a 20-pin micro-D connector).

City	State	Zip Code
------	-------	----------

Transaction ID : D341635

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

200.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

### B. Walgreens

Date of Disbursement

MM / DD / YYYY

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Transaction ID : D341645

### Purpose of Disbursement Pre-Paid Debit Cards

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1050.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. Paychex

Date of Disbursement

Mailing Address 3636 Executive Center Drive #100

City	State	Zip Code
Austin	TX	78731

Transaction ID : D341675

Purpose of Disbursement	Payroll Taxes
-------------------------	---------------

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

70.57

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1320.57

**TOTAL** This Period (last page this line number only).....



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

The image shows three different connector types: M10 (a 10-pin D-sub connector), D09 (a 9-pin D-sub connector), and Y2012 (a 20-pin micro-D connector).

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

3767.00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Age group	Number of people
0-14	10
15-24	20
25-34	30
35-44	40
45-54	50
55-64	60
65-74	70
75-84	80
85-94	90
95-104	100

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

1805.42

5706.64

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. John Brushwood

Date of Disbursement

Transaction ID : D341737

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

955.42

### B. AT&T

Date of Disbursement

Transaction ID : D341817

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Transaction ID : D341627

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1897.42

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Petty Cash

City	State	Zip Code
------	-------	----------

Transaction ID : D341637

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

350.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

### B. Walgreens

Date of Disbursement

MM / DD / YYYY

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Transaction ID : D341647

Purpose of Disbursement	Pre-Paid Debit Cards

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

5060.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. Amazon

Date of Disbursement

Mailing Address 1516 2nd Ave

City	State	Zip Code
Seattle	WA	98101

Transaction ID : D341667

Purpose of Disbursement	Office Supplies

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

239.55

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

5649.55

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

## **A. Paychex**

Mailing Address 3636 Executive Center Drive #100

City State Zip Code  
Austin TX 78731

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2012

Transaction ID : D341678

Amount of Each Disbursement this Period

287.85

Full Name (Last, First, Middle Initial)

## **B. A Quality Event, Inc.**

Mailing Address 1393 NW 74th St

City State Zip Code  
Miami FL 33147-6429

Purpose of Disbursement  
Equipment Rental for Event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : D341728

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. Amrry Gonzalez**

Mailing Address 1235 SW 6 Street #1

City State Zip Code  
Miami FL 33135

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Transaction ID : D341738

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1387.85

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Petty Cash

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2012

Transaction ID : D341628

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Petty Cash

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341638

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. Walgreens**

Mailing Address 9020 Biscayne Blvd.

City State Zip Code  
Miami FL 33138

Purpose of Disbursement  
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 09 / 2012

Transaction ID : D341648

Amount of Each Disbursement this Period

840.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1740.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3636 Executive Center Drive #100

City Austin    State TX    Zip Code 78731

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : D341668

Amount of Each Disbursement this Period

134.22

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 3636 Executive Center Drive #100

City Austin    State TX    Zip Code 78731

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2012

Transaction ID : D341679

Amount of Each Disbursement this Period

11372.42

**C. A Quality Event, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1393 NW 74th St

City Miami    State FL    Zip Code 33147-6429

Purpose of Disbursement  
Equipment Rental for Event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2012

Transaction ID : D341719

Amount of Each Disbursement this Period

375.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11881.64

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 222

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Ada Quinones Catering**

Mailing Address 13915 Wheeling Lane

City Jacksonville Beach      State FL      Zip Code 32250

Purpose of Disbursement  
Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : D341729

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

**B. One Stop Business Solutions LLC**Mailing Address 16112 NW 13th Ave  
#A

City Miami      State FL      Zip Code 33169

Purpose of Disbursement  
Office Equipment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : D341829

Amount of Each Disbursement this Period

208.65

Full Name (Last, First, Middle Initial)

**C. Petty Cash**

Mailing Address

City      State      Zip Code

Purpose of Disbursement  
Petty Cash

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341629

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

748.65

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Chevron

Mailing Address 700 NW 57th Ave

City	State	Zip Code
Miami	FL	33126-2002

### Purpose of Disbursement Pre-Paid Gasoline Cards

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341639

Amount of Each Disbursement this Period

8400.00

Full Name (Last, First, Middle Initial)

## B. Walgreens

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

### Purpose of Disbursement Pre-Paid Debit Cards

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three 10-pin D-sub connectors are shown, each with a different pin number: 10, 09, and 2012. The connectors are arranged horizontally, separated by slashes. Each connector has a top row of 5 pins and a bottom row of 5 pins. The pin numbers are printed in the center of each connector's body.

Transaction ID : D341649

Amount of Each Disbursement this Period

426.00

Full Name (Last, First, Middle Initial)

### C. Pizza Hut

Mailing Address 8900 Biscayne Blvd

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement	Meals

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341659

Amount of Each Disbursement this Period

165.70

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8991.70



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 222

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3636 Executive Center Drive #100

City Austin    State TX    Zip Code 78731

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : D341669

Amount of Each Disbursement this Period

254.10

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kennedy**Mailing Address 230 Phoenetia Avenue  
#4

City Miami    State FL    Zip Code 33134

Purpose of Disbursement  
Reimb. - Meals, Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2012

Transaction ID : D338104

Amount of Each Disbursement this Period

303.52

Full Name (Last, First, Middle Initial)

**C. Jeremy Wilson**

Mailing Address PO. Box 398372

City Miami Beach    State FL    Zip Code 33239

Purpose of Disbursement  
Reimb. - Event Supplies, Food/Beverage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : D341732

Amount of Each Disbursement this Period

270.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

827.62



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 222

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. Angela Given**

Mailing Address 1111 E. Atlantic Ave

City Delray Beach      State FL      Zip Code 33483

Purpose of Disbursement  
Reimb. - Office Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341740

Amount of Each Disbursement this Period

78.08

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address 6600 North Military Trail

City Boca Raton      State FL      Zip Code 33487

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341946

Amount of Each Disbursement this Period

20.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Costco Wholesale**

Mailing Address 14585 Biscayne Blvd

City North Miami      State FL      Zip Code 33181

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : D341947

Amount of Each Disbursement this Period

57.76

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.08

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

### A. Lee Molloy

Date of Disbursement

Mailing Address 1175 NE Miami Gardens Drive  
404 E

City	State	Zip Code
Miami Beach	FL	33179

Transaction ID : D341743

Purpose of Disbursement
Reimb. - Supplies for Video Production

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

15.60

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

### B. Athena Jones

Date of Disbursement

Mailing Address 600 Yorktown Avenue

City	State	Zip Code
Portsmouth	VA	23704

Transaction ID : D341813

Purpose of Disbursement	
Reimb. - Mileage, Office Equipment	

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

240.79

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

256.39

**TOTAL** This Period (last page this line number only).....

162351.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 222

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

**A. The Pivot Group, Inc.**Mailing Address 1720 I Street, NW  
Suite 550

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Voter Canvass Literature for Non-Federal Candidates

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Transaction ID : D341932

Amount of Each Disbursement this Period

4443.60
---------

Full Name (Last, First, Middle Initial)

**B. The Pivot Group, Inc.**Mailing Address 1720 I Street, NW  
Suite 550

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Voter Canvass Literature for Non-Federal Candidates

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

Transaction ID : D341834

Amount of Each Disbursement this Period

8950.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

13393.60
----------

13393.60
----------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 39 OF 222

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Florida Freedom PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Florida New Majority**

Nature of Debt (Purpose):

Canvass Expenses &amp; Program Costs

Mailing Address 8330 Biscayne Blvd.  
Suite 1City State Zip Code  
Miami FL 33138

Outstanding Balance Beginning This Period

171215.22

Transaction ID : D338938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

171215.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

171215.22

2) **TOTALS** This Period (last page this line number only)..... ►

171215.22

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

171215.22

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Marilyn Carter</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1320 W 11 St		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1404.00         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334705

Full Name (Last, First, Middle Initial) of Payee <b>Devin Coleman</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 736 Odessa Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1404.00         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334708

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">2808.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 41 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Keanna Hall</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012
Mailing Address 10862 Natalie Dr		Amount <span style="border: 1px solid black; padding: 2px;">1404.00</span>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Transaction ID : D334712
Category/ Type	<span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Marta Marcano</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012
Mailing Address 420 E Galvez Lane Apt 206		Amount <span style="border: 1px solid black; padding: 2px;">1404.00</span>
City Ponte Vedra	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Transaction ID : D334713
Category/ Type	<span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">2808.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 42 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adil McCoy</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 01 / 2012         </div>
Mailing Address 530 Fallen Timbers		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City Orange Park	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334715

Full Name (Last, First, Middle Initial) of Payee <b>Orlando Reyes</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 01 / 2012         </div>
Mailing Address 5807 Ricker Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334717

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2808.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 43 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Velma Rounsville</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 3238 Sedona Trail		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1404.00</div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334719

Full Name (Last, First, Middle Initial) of Payee <b>Troy Squire</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 1356 W 32 Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1404.00</div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334722

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2808.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 44 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Cameron Starkes</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 3919 Robert C Weaver Drive		Amount <b>1404.00</b>	
City Jacksonville	State FL	Zip Code 32208	Transaction ID : <b>D334725</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Ellis White</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 5571 Longspur Ave		Amount <b>1404.00</b>	
City Jacksonville	State FL	Zip Code 32219	Transaction ID : <b>D334726</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>2808.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 45 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Acevedo</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL	Zip Code 33135	<b>Transaction ID : D334729</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Acevedo</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL	Zip Code 33135	<b>Transaction ID : D334730</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 46 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Lubby Arguello</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 1567 SW 4 Street Apt 10		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Lubby Arguello</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 1567 SW 4 Street Apt 10		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 47 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Kerline Cambronne</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">702.00</span> </div>
City State Zip Code Fort Lauderdale FL 33311		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334739

Full Name (Last, First, Middle Initial) of Payee <b>Kerline Cambronne</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">702.00</span> </div>
City State Zip Code Fort Lauderdale FL 33311		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">171014.85</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334741

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 48 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Marie Camy</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           702.00         </div>
City State Zip Code North Miami Beach FL 33179	Transaction ID : <b>D334743</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Marie Camy</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           702.00         </div>
City State Zip Code North Miami Beach FL 33179	Transaction ID : <b>D334745</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House    State: <u>FL</u> <input type="checkbox"/> Senate    District: <u>26</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           171014.85         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 49 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Keren Frederick</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 1341 NE 143 Street		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought:
		001	<input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334746

Full Name (Last, First, Middle Initial) of Payee <b>Keren Frederick</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 1341 NE 143 Street		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought:
		001	<input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334747

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 50 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Rochelle Jackson</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>PO Box 380265</b>		Amount <b>702.00</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33238</b>	Transaction ID : <b>D334749</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Rochelle Jackson</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>PO Box 380265</b>		Amount <b>702.00</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33238</b>	Transaction ID : <b>D334751</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>26</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JOE GARCIA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>171014.85</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>1404.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 51 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Johann Joseph</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City North Miami Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		001	State: _____ District: _____
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334753

Full Name (Last, First, Middle Initial) of Payee <b>Johann Joseph</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City North Miami Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		001	State: FL District: 26
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334754

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 52 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Thamara LaCruz</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 21325 NE 8 Place #1K		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D334757

Full Name (Last, First, Middle Initial) of Payee <b>Thamara LaCruz</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 21325 NE 8 Place #1K		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D334758

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 53 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Gennary Merchan</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL	Zip Code 33183	Transaction ID : D334762
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Gennary Merchan</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Miami	State FL	Zip Code 33183	Transaction ID : D334763
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 54 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Harold Pendas</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334764

Full Name (Last, First, Middle Initial) of Payee <b>Harold Pendas</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334765

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 55 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Rossana Torres</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City State Zip Code Miami FL 33172	Transaction ID : <b>D334766</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Rossana Torres</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City State Zip Code Miami FL 33172	Transaction ID : <b>D334768</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>FL</u> District: <u>26</u>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Louikens Toussaint</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>429 NW 84 Terrace</b>		Amount <b>702.00</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33150</b>	Transaction ID : <b>D334769</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Zavala</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>12641 Sw 35 Street</b>		Amount <b>702.00</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33175</b>	Transaction ID : <b>D334771</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>1404.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**10 / 25 / 2012**



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 57 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Zavala</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 12641 Sw 35 Street		Amount <b>702.00</b>	
City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33175</b>	Transaction ID : <b>D334773</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>26</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JOE GARCIA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>171014.85</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Pilar Burgos</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 4214 Pershing Pointe Place #3		Amount <b>702.00</b>	
City <b>Orlando</b>	State <b>FL</b>	Zip Code <b>32822</b>	Transaction ID : <b>D334774</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>1404.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Linda Echeverria</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334775

Full Name (Last, First, Middle Initial) of Payee <b>Evon Hammond</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 3137 Floral Way East		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City Apopka	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334776

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 59 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Justin Conner Jones</b>		Date <span style="border: 1px solid black; padding: 2px;">10 / 01 / 2012</span>	
Mailing Address 2115 River Tree Circle		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>			

Transaction ID : D334778

Full Name (Last, First, Middle Initial) of Payee <b>Cartine Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">10 / 01 / 2012</span>	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>			

Transaction ID : D334779

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1404.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 60 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Obas</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Orlando	State FL	
Zip Code 32835		Transaction ID : <b>D334782</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Obas</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>
Mailing Address 6372 Raleigh Street Apt 1904		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Orlando	State FL	
Zip Code 32835		Transaction ID : <b>D334784</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

MM / DD / YYYY

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 61 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Gabriela Ortega</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>3732 Aldergate Pl.</b>		Amount <b>702.00</b>	
City <b>Casselberry</b>	State <b>FL</b>	Zip Code <b>32707</b>	Transaction ID : <b>D334785</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Ortega</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address <b>3732 Aldergate PL</b>		Amount <b>702.00</b>	
City <b>Casselberry</b>	State <b>FL</b>	Zip Code <b>32707</b>	Transaction ID : <b>D334786</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>1404.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 62 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Eric Pagan</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 290 Augustine Ct.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Oviedo	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334787

Full Name (Last, First, Middle Initial) of Payee <b>Benjamin Pusey</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334789

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 63 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Brian Quillen</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 01 / 2012         </div>
Mailing Address 232 Parkwood Drive S		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334791

Full Name (Last, First, Middle Initial) of Payee <b>Diego Renteria</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 01 / 2012         </div>
Mailing Address 430 Green Spring Circle		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City Winter Springs	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334793

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 64 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Audeliz Sanchez</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 3104 Orchard Place		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City Kissimmee	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334795

Full Name (Last, First, Middle Initial) of Payee <b>Damon Taylor</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 10 Eaton Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City Eatonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334796

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 65 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Antrenic Williams</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 3070 Malcolm Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City State Zip Code Deltona FL 32738		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334798

Full Name (Last, First, Middle Initial) of Payee <b>Dionne Allen</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 12303 Bohannon Blvd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City State Zip Code Orlando FL 32824		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334799

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 66 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Dionne Allen</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 12303 Bohannon Blvd		Amount <b>351.00</b>	
City Orlando	State FL	Zip Code 32824	Transaction ID : D334801
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>18</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>PATRICK MURPHY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>80850.71</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Alexis Cartland</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>	
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <b>702.00</b>	
City West Palm Beach	State FL	Zip Code 33411	Transaction ID : D334802
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>1053.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 67 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Alexis Cartland</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">351.00</span> </div>
City State Zip Code West Palm Beach FL 33411		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">80850.71</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334803

Full Name (Last, First, Middle Initial) of Payee <b>Kathy Dent</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 1834 SE Aneci Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City State Zip Code Port Saint Lucie FL 34983		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334804

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">1053.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 68 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Kathy Dent</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012
Mailing Address 1834 SE Aneci Street		Amount <span style="border: 1px solid black; padding: 2px;">351.00</span>
City Port Saint Lucie	State FL	
Zip Code 34983		Transaction ID : D334805
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Sarah Halper</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012
Mailing Address 709 S D Street		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>
City Lake Worth	State FL	
Zip Code 33460		Transaction ID : D334807
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1053.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 69 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sarah Halper</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 709 S D Street		Amount <span style="border: 1px solid black; padding: 2px;">351.00</span>	
City Lake Worth	State FL	Zip Code 33460	<b>Transaction ID : D334809</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Sandy Hector</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 4330 Village Drive #B		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City Delray	State FL	Zip Code 33445	<b>Transaction ID : D334810</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1053.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 70 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sandy Hector</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 01 / 2012       </div>
Mailing Address 4330 Village Drive #B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">351.00</span> </div>
City Delray	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334812

Full Name (Last, First, Middle Initial) of Payee <b>Tony Patterson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 01 / 2012       </div>
Mailing Address 1638 Bresee Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334814

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">1053.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Full Name (Last, First, Middle Initial) of Payee <b>Louis Porteous</b>		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 3059 SE Amherst Street		Amount 702.00	
City Stuart	State FL	Zip Code 34997	Transaction ID : D334819
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought	2759856.99	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) _____	<input checked="" type="checkbox"/> General

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	1053.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 72 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Louis Porteous</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           351.00         </div>
City State Zip Code Stuart FL 34997	<b>Transaction ID : D334821</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           80850.71         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Robert Richardson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City State Zip Code Riviera Beach FL 33404	<b>Transaction ID : D334823</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         1053.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         1053.00       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 73 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Robert Richardson</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">351.00</span> </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334828

Full Name (Last, First, Middle Initial) of Payee <b>Yettie Thompkins</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 414 Lincoln Rd.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">702.00</span> </div>
City Cocoa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334829

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1053.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 74 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Yettie Thompkins</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 414 Lincoln Rd.		Amount <span style="border: 1px solid black; padding: 2px;">351.00</span>	
City Cocoa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>			

Transaction ID : D334830

Full Name (Last, First, Middle Initial) of Payee <b>John Tracey</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2012	
Mailing Address 2812 Genessee Ave		Amount <span style="border: 1px solid black; padding: 2px;">702.00</span>	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>			

Transaction ID : D334832

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">1053.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 75 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>John Tracey</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 2812 Genessee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           351.00         </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">80850.71</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334833

Full Name (Last, First, Middle Initial) of Payee <b>Frankisha Walker</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 3414 34th Way		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           702.00         </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334834

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1053.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 76 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Frankisha Walker</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address <b>3414 34th Way</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">351.00</span> </div>
City <b>West Palm Beach</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>PATRICK MURPHY</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>18</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334836

Full Name (Last, First, Middle Initial) of Payee <b>Muslim Ali</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address <b>6513 Yellow Hammer Ave</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">1404.00</span> </div>
City <b>Tampa</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334837

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">1755.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 77 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Khaim Jack Cousineau</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">           1404.00         </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334839

Full Name (Last, First, Middle Initial) of Payee <b>Alissah Depiro</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 3721 Mission Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;">           1404.00         </div>
City Largo	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334842

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;">         2808.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 150px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;"> </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 78 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Jefferson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 8515 River Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City State Zip Code Tampa FL 33615	<b>Transaction ID : D334843</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Juges</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City State Zip Code Tampa FL 33612	<b>Transaction ID : D334845</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         2808.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 79 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Stephen Radcliff</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 6753 Ralston Beach Circle		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City State Zip Code Tampa FL 33614	<b>Transaction ID : D334847</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Romero</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 1101 Arboleda Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City State Zip Code Tampa FL 33664	<b>Transaction ID : D334848</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         2808.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         _____       </div>

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Gihan Perera

[Electronically Filed]

Date

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 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 80 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Mable Smith</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 4203 Arch		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334850

Full Name (Last, First, Middle Initial) of Payee <b>Tea Zubic</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 01 / 2012         </div>
Mailing Address 2704 Brigadoon Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1404.00         </div>
City Clearwater	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334853

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2808.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 81 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">2100.00</span> </div>
City Miami State FL Zip Code 33138	<b>Transaction ID : D334973</b>	
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">150.00</span> </div>
City Miami State FL Zip Code 33138	<b>Transaction ID : D334974</b>	
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">80850.71</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">2250.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

Signature

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 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 82 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">300.00</span> </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334975

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 01 / 2012         </div>
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">596.25</span> </div>
City Washington State DC Zip Code 20006		
Purpose of Expenditure Voter Canvass Literature	Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D335028

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">896.25</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

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Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 83 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>The Pivot Group, Inc.</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1788.75         </div>
City Washington State DC Zip Code 20006		
Purpose of Expenditure Voter Canvass Literature	Category/Type <div style="border: 1px solid black; padding: 2px;">006</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D335029

Full Name (Last, First, Middle Initial) of Payee <b>SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           148387.95         </div>
City WASHINGTON State DC Zip Code 20036		
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D335030

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">150176.70</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 84 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 01 / 2012         </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">74193.98</div>
City WASHINGTON	State DC	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">80850.71</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D335031

Full Name (Last, First, Middle Initial) of Payee <b>SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 01 / 2012         </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1038715.68</div>
City WASHINGTON	State DC	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D335032

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1112909.66</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y

10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 85 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1531.20         </div>
City Miami State FL Zip Code 33138	Transaction ID : <b>D340167</b>	
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1531.20         </div>
City Miami State FL Zip Code 33138	Transaction ID : <b>D340168</b>	
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>FL</u> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">294216.97</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">3062.40</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1030.08</span> </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340169

Full Name (Last, First, Middle Initial) of Payee <b>Florida New Majority</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">587.42</span> </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340170

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1617.50</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 87 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Hilda Alvarado</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 16325 NW 24 St.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Hilda Alvarado</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 16325 NW 24 St.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Joseph Benia</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 12027 SW 15th St.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL	Zip Code 33025	<b>Transaction ID : D340173</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Joseph Benia</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 12027 SW 15th St.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL	Zip Code 33025	<b>Transaction ID : D340174</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Lovemore Chiweshe</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 14222 NW 18th Pl.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Lovemore Chiweshe</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 14222 NW 18th Pl.		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Hollywood	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Marquell Drigo</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6240 NW 14th Pl.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340177

Full Name (Last, First, Middle Initial) of Payee <b>Marquell Drigo</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6240 NW 14th Pl.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340178

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 91 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Nelson Dubreus</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1720 NW 7th Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Zip Code 33311	Transaction ID : D340179	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Nelson Dubreus</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1720 NW 7th Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Zip Code 33311	Transaction ID : D340180	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 92 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Brian Dunlop</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 130 NE 41st St., #8		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Brian Dunlop</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 130 NE 41st St., #8		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 93 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Enode Duvercy</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 2324 NW 15th St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : <b>D340183</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Enode Duvercy</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 2324 NW 15th St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : <b>D340184</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 94 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Patrinda Duvercy</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 906 NW 2nd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Ft. Lauderdale	State FL	
Zip Code 33371	Transaction ID : D340185	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Patrinda Duvercy</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 906 NW 2nd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Ft. Lauderdale	State FL	
Zip Code 33371	Transaction ID : D340186	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 95 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Marie Fleuridor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 17335 NW 7 Ave., #109		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Marie Fleuridor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 17335 NW 7 Ave., #109		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 96 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Gladys Gomez</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 7351 NW 20th Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           418.28         </div>
City State Zip Code Fort Lauderdale FL 33313	Transaction ID : <b>D340189</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Gladys Gomez</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 7351 NW 20th Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           418.28         </div>
City State Zip Code Fort Lauderdale FL 33313	Transaction ID : <b>D340190</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         836.56       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 97 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Zanolee Grant</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 151 NW 154th St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340191

Full Name (Last, First, Middle Initial) of Payee <b>Zanolee Grant</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 151 NW 154th St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340192

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 98 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Anton McCormack</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1410 NW 33rd Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : <b>D340193</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Anton McCormack</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1410 NW 33rd Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : <b>D340194</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 99 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Brayam Morales</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3101 Port Royale Blvd Apt 936		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City State Zip Code Fort Lauderdale FL 33308-7818		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Brayam Morales</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3101 Port Royale Blvd Apt 936		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City State Zip Code Fort Lauderdale FL 33308-7818		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">836.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 100 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Ryanbo Morales</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 365 NE 191st		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D340198

Full Name (Last, First, Middle Initial) of Payee <b>Ryanbo Morales</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 365 NE 191st		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D340199

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 101 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Joy Myton</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 795 NW 72 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Pompano Beach	State FL Zip Code 33063	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340200

Full Name (Last, First, Middle Initial) of Payee <b>Joy Myton</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 795 NW 72 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Pompano Beach	State FL Zip Code 33063	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340201

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">836.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 102 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Palomanes</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 227 SE 1st, Apt. A		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Dania	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340202</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Maria Palomanes</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 227 SE 1st, Apt. A		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Dania	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340203</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 103 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Virginia Quintanilla</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 415 SE 3rd Ave., Apt. 6		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Hallandale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340204

Full Name (Last, First, Middle Initial) of Payee <b>Virginia Quintanilla</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 415 SE 3rd Ave., Apt. 6		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Hallandale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340205

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 104 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Vinson Renaud</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 1107 NW 15th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px;">           001         </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340206

Full Name (Last, First, Middle Initial) of Payee <b>Vinson Renaud</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 1107 NW 15th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px;">           001         </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340207

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 105 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Milagros Rodriguez</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 2837 NW 184 Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Hollywood FL 33029	<b>Transaction ID : D340208</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Milagros Rodriguez</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 2837 NW 184 Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City State Zip Code Hollywood FL 33029	<b>Transaction ID : D340210</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 106 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Carlisle Sumintra</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 2850 SW 18 Terr., #17		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340211

Full Name (Last, First, Middle Initial) of Payee <b>Carlisle Sumintra</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address 2850 SW 18 Terr., #17		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340212

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 107 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jimmy Williams</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1420 NW 9th St., Apt. 13		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340214

Full Name (Last, First, Middle Initial) of Payee <b>Jimmy Williams</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1420 NW 9th St., Apt. 13		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340216

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 108 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Cornelius Wilson</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6240 NW 14th Pl.		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340218

Full Name (Last, First, Middle Initial) of Payee <b>Cornelius Wilson</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6240 NW 14th Pl.		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340219

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           836.56         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           0.00         </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           836.56         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 109 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Shonaye Wright</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 5119 NW 16th Pl., Apt 3		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340222

Full Name (Last, First, Middle Initial) of Payee <b>Shonaye Wright</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 5119 NW 16th Pl., Apt 3		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340223

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 110 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Albertine Bazile</b>		Date <div style="border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address 749 SW 7 Terrace		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px;">           2759856.99         </div>		<div style="border: 1px solid black; padding: 2px;">           Transaction ID : D340226         </div>

Full Name (Last, First, Middle Initial) of Payee <b>Albertine Bazile</b>		Date <div style="border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address 749 SW 7 Terrace		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px;">           294216.97         </div>		<div style="border: 1px solid black; padding: 2px;">           Transaction ID : D340227         </div>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>

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Gihan Perera

Signature

[Electronically Filed]

Date

10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 111 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Albertine Bazile</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address <b>749 SW 7 Terrace</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City <b>Homestead</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JOE GARCIA</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>26</b>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340229

Full Name (Last, First, Middle Initial) of Payee <b>Remy Bornelus</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address <b>13151 SW 265 Terr</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City <b>Homestead</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340230

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 112 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Remy Bornelus</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 13151 SW 265 Terr		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee <b>Remy Bornelus</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 13151 SW 265 Terr		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 113 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Arely Castrejon</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 665 SW 15 St.		<div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
City Homestead	State FL	Zip Code 33034
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           281.39         </div>
Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;">           001         </div>		<b>Transaction ID : D340234</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Arely Castrejon</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 665 SW 15 St.		<div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
City Homestead	State FL	Zip Code 33034
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           281.39         </div>
Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;">           001         </div>		<b>Transaction ID : D340236</b>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           171014.85         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         562.78       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 114 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Arely Castrejon</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 665 SW 15 St.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">281.39</div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340238

Full Name (Last, First, Middle Initial) of Payee <b>Aide Cortes</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1481 Kia Dr.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">281.39</div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340240

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">562.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Aide Cortes</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 1481 Kia Dr.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294216.97</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340241

Full Name (Last, First, Middle Initial) of Payee <b>Aide Cortes</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 1481 Kia Dr.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340243

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 116 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jose Diego Cuellar</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 211 SW 6th Ct.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340244

Full Name (Last, First, Middle Initial) of Payee <b>Jose Diego Cuellar</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 211 SW 6th Ct.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340245

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 117 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jose Diego Cuellar</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 211 SW 6th Ct.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340246

Full Name (Last, First, Middle Initial) of Payee <b>Guadalupe DelaCruz</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340249

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 118 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Guadalupe DelaCruz</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340250

Full Name (Last, First, Middle Initial) of Payee <b>Guadalupe DelaCruz</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340251

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 119 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Micheline Dore</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 740 NW 5 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340257

Full Name (Last, First, Middle Initial) of Payee <b>Micheline Dore</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 740 NW 5 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340259

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 120 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Micheline Dore</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 740 NW 5 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340261

Full Name (Last, First, Middle Initial) of Payee <b>Joseph Dorsinvil</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 25920 SW 143 Ct, # 313		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340262

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 121 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Joseph Dorsinvil</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 25920 SW 143 Ct, # 313		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead State FL Zip Code 33032	<b>Transaction ID : D340264</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294216.97</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Joseph Dorsinvil</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 25920 SW 143 Ct, # 313		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           281.39         </div>
City Homestead State FL Zip Code 33032	<b>Transaction ID : D340265</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 122 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maira Gaspar</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M</span><span style="border: 1px solid black; padding: 0 5px;">M</span> / <span style="border: 1px solid black; padding: 0 5px;">D</span><span style="border: 1px solid black; padding: 0 5px;">D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span> </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">10</span><span style="border: 1px solid black; padding: 0 5px;">16</span><span style="border: 1px solid black; padding: 0 5px;">2012</span> </div>
City Homestead	State FL	Zip Code 33030
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 0 5px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">5</span><span style="border: 1px solid black; padding: 0 5px;">5</span><span style="border: 1px solid black; padding: 0 5px;">2759856.99</span> </span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340266

Full Name (Last, First, Middle Initial) of Payee <b>Maira Gaspar</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M</span><span style="border: 1px solid black; padding: 0 5px;">M</span> / <span style="border: 1px solid black; padding: 0 5px;">D</span><span style="border: 1px solid black; padding: 0 5px;">D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span><span style="border: 1px solid black; padding: 0 5px;">Y</span> </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">10</span><span style="border: 1px solid black; padding: 0 5px;">16</span><span style="border: 1px solid black; padding: 0 5px;">2012</span> </div>
City Homestead	State FL	Zip Code 33030
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 0 5px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">5</span><span style="border: 1px solid black; padding: 0 5px;">5</span><span style="border: 1px solid black; padding: 0 5px;">294216.97</span> </span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340267

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"> </span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"> </span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

MM / DD / YYYY

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 123 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maira Gaspar</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030	<b>Transaction ID : D340268</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Maritza Gonzalez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33032	<b>Transaction ID : D340270</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 124 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maritza Gonzalez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340271

Full Name (Last, First, Middle Initial) of Payee <b>Maritza Gonzalez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340272

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 125 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sarai Hernandez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City	State	Zip Code	Transaction ID : D340273
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Sarai Hernandez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City	State	Zip Code	Transaction ID : D340275
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 126 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sarai Hernandez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City	State	
Zip Code		Transaction ID : D340277
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>FL</u> District: <u>26</u>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Adriana Ibanez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Zip Code 33030		Transaction ID : D340279
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 127 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Adriana Ibanez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340280

Full Name (Last, First, Middle Initial) of Payee <b>Adriana Ibanez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340282

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 128 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Elena Loarca</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1010 NE 9th St		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030	<b>Transaction ID : D340284</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Elena Loarca</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1010 NE 9th St		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030	<b>Transaction ID : D340285</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 129 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Elena Loarca</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1010 NE 9th St		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340286

Full Name (Last, First, Middle Initial) of Payee <b>Robert Mentor</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 277 NE 9th Ct.		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340290

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           562.78         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           0.00         </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           562.78         </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 130 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Robert Mentor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 277 NE 9th Ct.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33030	Transaction ID : D340292
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Robert Mentor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 277 NE 9th Ct.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33030	Transaction ID : D340293
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 131 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jaime Novoa</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030	<b>Transaction ID : D340298</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Jaime Novoa</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030	<b>Transaction ID : D340299</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 132 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Jaime Novoa</b>		Date <div style="border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House    State: FL <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px;">           171014.85         </div>		<div style="border: 1px solid black; padding: 2px;">           Transaction ID : D340300         </div>

Full Name (Last, First, Middle Initial) of Payee <b>Felecia O'Neal</b>		Date <div style="border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: <input type="checkbox"/> Senate    District: <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px;">           2759856.99         </div>		<div style="border: 1px solid black; padding: 2px;">           Transaction ID : D340301         </div>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 133 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Felecia O'Neal</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340302

Full Name (Last, First, Middle Initial) of Payee <b>Felecia O'Neal</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340303

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">562.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 134 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Leidy Perez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 1201 NW 8 St		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>
City Homestead	State FL	
Zip Code 33030		Transaction ID : D340307
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Leidy Perez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 1201 NW 8 St		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>
City Homestead	State FL	
Zip Code 33030		Transaction ID : D340308
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 135 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Leidy Perez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1201 NW 8 St		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33030	Transaction ID : D340310
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 26
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Domingo Ramirez</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1035 NE 3rd Ave.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33030	Transaction ID : D340315
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 136 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Domingo Ramirez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1035 NE 3rd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340316

Full Name (Last, First, Middle Initial) of Payee <b>Domingo Ramirez</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1035 NE 3rd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340318

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

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Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 137 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Nicolas Rubio</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 31847 SW 136th Ave.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33033	Transaction ID : D340320
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Nicolas Rubio</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 31847 SW 136th Ave.		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL	Zip Code 33033	Transaction ID : D340322
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 138 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Nicolas Rubio</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 31847 SW 136th Ave.		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead State FL Zip Code 33033	<b>Transaction ID : D340323</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Judith Famania</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 336 SW 3 St		Amount <div style="border: 1px solid black; padding: 2px;">           281.39         </div>
City Homestead State FL Zip Code 33034	<b>Transaction ID : D340325</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">         562.78       </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 139 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Judith Famania</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 336 SW 3 St		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340327

Full Name (Last, First, Middle Initial) of Payee <b>Judith Famania</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 336 SW 3 St		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340329

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">562.78</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

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 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 140 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Alex Vanegas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 450 Davis Parkway		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340331

Full Name (Last, First, Middle Initial) of Payee <b>Alex Vanegas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 450 Davis Parkway		Amount <span style="border: 1px solid black; padding: 2px;">281.39</span>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340332

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">562.78</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 141 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Alex Vanegas</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 450 Davis Parkway		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">281.39</span> </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171014.85</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340333

Full Name (Last, First, Middle Initial) of Payee <b>Marilyn Carter</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 1320 W 11 St		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340335

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">699.67</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 142 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Marilyn Carter</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 1320 W 11 St		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340337

Full Name (Last, First, Middle Initial) of Payee <b>Devin Coleman</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 736 Odessa Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340340

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 143 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Devin Coleman</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 736 Odessa Street		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Zip Code 32206		Transaction ID : D340341
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Keanna Hall</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 10862 Natalie Dr		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Zip Code 32218		Transaction ID : D340342
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

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Date

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 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 144 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Keanna Hall</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 10862 Natalie Dr		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Jacksonville	State FL	
Zip Code 32218	Transaction ID : D340343	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Marta Marcano</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 420 E Galvez Lane Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Ponte Vedra	State FL	
Zip Code 32081	Transaction ID : D340344	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

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Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 145 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Marta Marcano</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 420 E Galvez Lane Apt 206		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Ponte Vedra	State FL	
Zip Code 32081		Transaction ID : D340345
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Adil McCoy</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 530 Fallen Timbers		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Orange Park	State FL	
Zip Code 32073		Transaction ID : D340346
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 146 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Adil McCoy</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>530 Fallen Timbers</b>		Amount <b>418.28</b>	
City <b>Orange Park</b>	State <b>FL</b>	Zip Code <b>32073</b>	Transaction ID : <b>D340348</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Orlando Reyes</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>5807 Ricker Road</b>		Amount <b>418.28</b>	
City <b>Jacksonville</b>	State <b>FL</b>	Zip Code <b>32244</b>	Transaction ID : <b>D340349</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>836.56</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 147 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Orlando Reyes</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 5807 Ricker Road		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Jacksonville	State FL	
Zip Code 32244	Transaction ID : D340350	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Velma Rounsville</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 3238 Sedona Trail		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Jacksonville	State FL	
Zip Code 32208	Transaction ID : D340351	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 148 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee <b>Velma Rounsville</b>		Date M M M / D D D / Y Y Y Y Y Y <b>10 / 16 / 2012</b>	
Mailing Address <b>3238 Sedona Trail</b>		Amount <b>418.28</b>	
City <b>Jacksonville</b>	State <b>FL</b>	Zip Code <b>32208</b>	Transaction ID : <b>D340352</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>294216.97</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Troy Squire</b>		Date M M M / D D D / Y Y Y Y Y Y <b>10 / 16 / 2012</b>	
Mailing Address <b>1356 W 32 Street</b>		Amount <b>418.28</b>	
City <b>Jacksonville</b>	State <b>FL</b>	Zip Code <b>32209</b>	Transaction ID : <b>D340353</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>836.56</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 149 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Troy Squire</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1356 W 32 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">294216.97</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340354

Full Name (Last, First, Middle Initial) of Payee <b>Cameron Starkes</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3919 Robert C Weaver Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340355

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">836.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Signature

Date

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 150 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Cameron Starkes</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>3919 Robert C Weaver Drive</b>		Amount <b>418.28</b>	
City <b>Jacksonville</b>	State <b>FL</b>	Zip Code <b>32208</b>	Transaction ID : <b>D340357</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>294216.97</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Ellis White</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>5571 Longspur Ave</b>		Amount <b>418.28</b>	
City <b>Jacksonville</b>	State <b>FL</b>	Zip Code <b>32219</b>	Transaction ID : <b>D340359</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>836.56</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 151 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Ellis White</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 5571 Longspur Ave		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Jacksonville	State FL	Zip Code 32219	<b>Transaction ID : D340360</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Acevedo</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL	Zip Code 33135	<b>Transaction ID : D340361</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 152 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Acevedo</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL	Zip Code 33135	<b>Transaction ID : D340362</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Lubby Arguello</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1567 SW 4 Street Apt 10		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL	Zip Code 33135	<b>Transaction ID : D340364</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 153 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Lubby Arguello</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 1567 SW 4 Street Apt 10		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Miami	State FL	
Zip Code 33135		Transaction ID : D340365
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Marie Camy</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 2131 NE Miami Gardens Drive		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City North Miami Beach	State FL	
Zip Code 33179		Transaction ID : D340367
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 154 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Marie Camy</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City State Zip Code North Miami Beach FL 33179	Transaction ID : <b>D340368</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Lawrence Cuervo</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 15705 Miami Lakeway N		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City State Zip Code Miami Lakes FL 33014	Transaction ID : <b>D340369</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 155 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Lawrence Cuervo</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 15705 Miami Lakeway N		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami Lakes	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340370

Full Name (Last, First, Middle Initial) of Payee <b>Keren Frederick</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1341 NE 143 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340371

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 156 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Keren Frederick</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address 1341 NE 143 Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340372

Full Name (Last, First, Middle Initial) of Payee <b>Rochelle Jackson</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">           M M / D D / Y Y Y Y Y Y         </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
Mailing Address PO Box 380265		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340373

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 157 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Rochelle Jackson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address <b>PO Box 380265</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City <b>Miami</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340374

Full Name (Last, First, Middle Initial) of Payee <b>Johann Joseph</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> </div>
Mailing Address <b>2131 NE Miami Gardens Drive</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City <b>North Miami Beach</b>	State <b>FL</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340375

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 158 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Johann Joseph</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City North Miami Beach	State FL	
Zip Code 33179	Transaction ID : D340376	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Thamara LaCruz</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 21325 NE 8 Place #1K		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Miami	State FL	
Zip Code 33179	Transaction ID : D340377	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 159 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Thamara LaCruz</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 21325 NE 8 Place #1K		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340378

Full Name (Last, First, Middle Initial) of Payee <b>Gennary Merchan</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340379

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         836.56       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 160 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Gennary Merchan</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340380

Full Name (Last, First, Middle Initial) of Payee <b>Harold Pendas</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340381

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 161 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Harold Pendas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1222 NW 58 ST		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL	Zip Code 33142	<b>Transaction ID : D340382</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Rossana Torres</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Miami	State FL	Zip Code 33172	<b>Transaction ID : D340383</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 162 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Rossana Torres</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">10 / 16 / 2012</span> </div>
City State Zip Code Miami FL 33172	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">418.28</span> </div>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340384</b>
Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>	Office Sought: <input type="checkbox"/> House State: <u>FL</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 0 5px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Louikens Toussaint</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 429 NW 84 Terrace		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">10 / 16 / 2012</span> </div>
City State Zip Code Miami FL 33150	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">418.28</span> </div>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340385</b>
Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 0 5px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">836.56</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 163 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Louikens Toussaint</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 429 NW 84 Terrace		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340386

Full Name (Last, First, Middle Initial) of Payee <b>Maria Zavala</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340387

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         836.56       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 164 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Maria Zavala</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           418.28         </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House    State: FL <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D340388

Full Name (Last, First, Middle Initial) of Payee <b>Larniece Alexander-Weisz</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 5436 Eugeneia Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D340389

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         578.75       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

 Date 

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 165 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Larniece Alexander-Weisz</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 5436 Eugeneia Court		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340390

Full Name (Last, First, Middle Initial) of Payee <b>Larniece Alexander-Weisz</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 5436 Eugeneia Court		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340391

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 166 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Dionne Allen</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 12303 Bohannon Blvd		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Dionne Allen</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 12303 Bohannon Blvd		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

Full Name (Last, First, Middle Initial) of Payee <b>Pilar Burgos</b>		Date <div> <div>MM / DD / YY</div> <div>10 / 16 / 2012</div> </div>	
Mailing Address 4214 Pershing Pointe Place #3		Amount <div> <div></div> <div>160.47</div> </div>	
City Orlando	State FL	Zip Code 32822	<b>Transaction ID : D340395</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		District: _____ Check One: <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ </div>	
<div> <div></div> <div>2759856.99</div> </div>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	320.94
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 168 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Pilar Burgos</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 4214 Pershing Pointe Place #3		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL	Zip Code 32822	<b>Transaction ID : D340396</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>			

Full Name (Last, First, Middle Initial) of Payee <b>Pilar Burgos</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 4214 Pershing Pointe Place #3		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL	Zip Code 32822	<b>Transaction ID : D340397</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 169 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Linda Echeverria</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>	
Mailing Address 11305 Spining Reel		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL	Zip Code 32852	<b>Transaction ID : D340399</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Linda Echeverria</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>	
Mailing Address 11305 Spining Reel		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL	Zip Code 32852	<b>Transaction ID : D340400</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 170 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Linda Echeverria</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340401

Full Name (Last, First, Middle Initial) of Payee <b>Emanuel Glenn</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City	State	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340402

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           320.94         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           0.00         </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">           320.94         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 171 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Emanuel Glenn</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City	State	Zip Code	Transaction ID : D340403
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Emanuel Glenn</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City	State	Zip Code	Transaction ID : D340404
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 172 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Evon Hammond</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 3137 Floral Way East		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>
City Apopka	State FL	
Zip Code 32703	Transaction ID : D340405	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Evon Hammond</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 3137 Floral Way East		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>
City Apopka	State FL	
Zip Code 32703	Transaction ID : D340406	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 173 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Evon Hammond</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 3137 Floral Way East		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Apopka	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Debora Hunte</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City	State		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 174 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Debora Hunte</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span style="border: 1px solid black; padding: 0 5px;">10</span> <span style="border: 1px solid black; padding: 0 5px;">16</span> <span style="border: 1px solid black; padding: 0 5px;">2012</span> </div>
Mailing Address  		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           160.47         </div>
City State Zip Code  		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340409</b>
Category/Type <span style="border: 1px solid black; padding: 2px; display: inline-block;">001</span>		Office Sought: <input type="checkbox"/> House State: <u>FL</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>Debora Hunte</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">M M</span> / <span style="border: 1px solid black; padding: 0 5px;">D D</span> / <span style="border: 1px solid black; padding: 0 5px;">Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span style="border: 1px solid black; padding: 0 5px;">10</span> <span style="border: 1px solid black; padding: 0 5px;">16</span> <span style="border: 1px solid black; padding: 0 5px;">2012</span> </div>
Mailing Address  		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           160.47         </div>
City State Zip Code  		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340410</b>
Category/Type <span style="border: 1px solid black; padding: 2px; display: inline-block;">001</span>		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>VALDEZ VAL DEMINGS</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           320.94         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

10
25
2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 175 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Justin Conner Jones</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2115 River Tree Circle		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Justin Conner Jones</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2115 River Tree Circle		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 176 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Justin Conner Jones</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2115 River Tree Circle		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340415

Full Name (Last, First, Middle Initial) of Payee <b>Cartine Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340416

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 177 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Cartine Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340417

Full Name (Last, First, Middle Initial) of Payee <b>Cartine Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340418

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 178 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Obas</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Zip Code 32835		Transaction ID : <b>D340419</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Charles Obas</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Zip Code 32835		Transaction ID : <b>D340420</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">320.94</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

 Date 

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 179 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Obas</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340421

Full Name (Last, First, Middle Initial) of Payee <b>David O'Conner</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 526 S Hampton Ave		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340423

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 180 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>David O'Conner</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 526 S Hampton Ave		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340424

Full Name (Last, First, Middle Initial) of Payee <b>David O'Conner</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 526 S Hampton Ave		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340425

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">           320.94         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">           0.00         </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">           320.94         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 181 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Gabriela Ortega</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Casselberry	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340428

Full Name (Last, First, Middle Initial) of Payee <b>Gabriela Ortega</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Casselberry	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340431

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Ortega</b>		Date <div> <div>MM / DD / YY</div> <div>10 / 16 / 2012</div> </div>	
Mailing Address 3732 Aldergate PL		Amount <div> <div></div> <div>160.47</div> </div>	
City Casselberry	State FL	Zip Code 32707	<b>Transaction ID : D340434</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		District: _____ Check One: <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <div> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ </div>	
		<div> <div></div> <div>2759856.99</div> </div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	320.94
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 183 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M / D D / Y Y Y Y Y Y         </div>		

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Ortega</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             M M / D D / Y Y Y Y Y Y           </div>	
Mailing Address 3732 Aldergate PL		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             10 / 16 / 2012           </div>	
City Casselberry	State FL	Zip Code 32707	Transaction ID : D340437
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             294216.97           </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Ortega</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             M M / D D / Y Y Y Y Y Y           </div>	
Mailing Address 3732 Aldergate PL		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             10 / 16 / 2012           </div>	
City Casselberry	State FL	Zip Code 32707	Transaction ID : D340438
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">             3957.29           </div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">320.94</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 184 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Eric Pagan</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 290 Augustine Ct.		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Oviedo	State FL	Zip Code 32765	Transaction ID : D340441
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Eric Pagan</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 290 Augustine Ct.		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Oviedo	State FL	Zip Code 32765	Transaction ID : D340442
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 185 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Eric Pagan</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 290 Augustine Ct.		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Oviedo	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340443

Full Name (Last, First, Middle Initial) of Payee <b>Benjamin Pusey</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 4150 Eastgate Ave #7108		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340444

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 186 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Benjamin Pusey</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340445

Full Name (Last, First, Middle Initial) of Payee <b>Benjamin Pusey</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340446

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 187 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Diego Renteria</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address 430 Green Spring Circle		Amount <b>160.47</b>
City Winter Springs	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340447</b>
Category/ Type	<b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		2759856.99

Full Name (Last, First, Middle Initial) of Payee <b>Diego Renteria</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address 430 Green Spring Circle		Amount <b>160.47</b>
City Winter Springs	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340448</b>
Category/ Type	<b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		294216.97

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>320.94</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 188 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Diego Renteria</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 430 Green Spring Circle		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
City Winter Springs	State FL	
Zip Code 32708	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340449</b>
Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>FL</u> District: <u>10</u>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           3957.29         </div>		

Full Name (Last, First, Middle Initial) of Payee <b>Audeliz Sanchez</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3104 Orchard Place		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 16 / 2012         </div>
City Kissimmee	State FL	
Zip Code 34743	Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340450</b>
Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 189 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Audeliz Sanchez</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address 3104 Orchard Place		Amount <b>160.47</b>
City Kissimmee	State FL	
Zip Code 34743		Transaction ID : D340451
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Category/Type <b>001</b>		State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>294216.97</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Audeliz Sanchez</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address 3104 Orchard Place		Amount <b>160.47</b>
City Kissimmee	State FL	
Zip Code 34743		Transaction ID : D340452
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Category/Type <b>001</b>		State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>3957.29</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>320.94</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 190 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Damon Taylor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 10 Eaton Street		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Eatonville	State FL	Zip Code 32751	<b>Transaction ID : D340453</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Damon Taylor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 10 Eaton Street		Amount <span style="border: 1px solid black; padding: 2px;">160.47</span>	
City Eatonville	State FL	Zip Code 32751	<b>Transaction ID : D340454</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">320.94</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Full Name (Last, First, Middle Initial) of Payee <b>Antrenic Williams</b>		Date <div> <div>MM / DD / YY</div> <div>10 / 16 / 2012</div> </div>	
Mailing Address 3070 Malcolm Drive		Amount <div> <div></div> <div>160.47</div> </div>	
City Deltona	State FL	Zip Code 32738	<b>Transaction ID : D340456</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		<div> <div></div> <div>2759856.99</div> </div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	320.94
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

*[Electronically Filed]*

Date \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 192 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Antrenic Williams</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 3070 Malcolm Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">160.47</span> </div>
City State Zip Code Deltona FL 32738		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340457

Full Name (Last, First, Middle Initial) of Payee <b>Antrenic Williams</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>          10 / 16 / 2012       </div>
Mailing Address 3070 Malcolm Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">160.47</span> </div>
City State Zip Code Deltona FL 32738		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">3957.29</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340458

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;">320.94</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 193 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Sterling Williams</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 3115 Houndsworth Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340459

Full Name (Last, First, Middle Initial) of Payee <b>Sterling Williams</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y         </div>
Mailing Address 3115 Houndsworth Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340460

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">320.94</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 194 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sterling Williams</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 3115 Houndsworth Court		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5 5 3957.29</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340461

Full Name (Last, First, Middle Initial) of Payee <b>Maxxwell Wright</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 2424 Barkwater Drive		Amount <div style="border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5 5 2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340462

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 195 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Maxxwell Wright</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 2424 Barkwater Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340463

Full Name (Last, First, Middle Initial) of Payee <b>Maxxwell Wright</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 2424 Barkwater Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           160.47         </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           3957.29         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340464

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         320.94       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 196 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Kerline Cambronne</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>2861 Somerset Drive #112</b>		Amount <b>316.88</b>	
City <b>Fort Lauderdale</b>	State <b>FL</b>	Zip Code <b>33311</b>	Transaction ID : <b>D340465</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>2759856.99</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Kerline Cambronne</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>	
Mailing Address <b>2861 Somerset Drive #112</b>		Amount <b>316.88</b>	
City <b>Fort Lauderdale</b>	State <b>FL</b>	Zip Code <b>33311</b>	Transaction ID : <b>D340466</b>
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <b>001</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BILL NELSON</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>294216.97</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>633.76</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 197 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;">           M M / D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Alexis Cartland</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 16 / 2012</div> </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">316.88</div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759856.99</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340467

Full Name (Last, First, Middle Initial) of Payee <b>Alexis Cartland</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 16 / 2012</div> </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">316.88</div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House    State: FL <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">294216.97</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340469

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">633.76</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 198 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Kathy Dent</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1834 SE Aneci Street		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Port Saint Lucie	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340471

Full Name (Last, First, Middle Initial) of Payee <b>Kathy Dent</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1834 SE Aneci Street		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Port Saint Lucie	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340472

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">633.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 199 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Sarah Halper</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y              10 / 16 / 2012           </div>
Mailing Address 709 S D Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">             316.88           </div>
City Lake Worth	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340473

Full Name (Last, First, Middle Initial) of Payee <b>Sarah Halper</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y              10 / 16 / 2012           </div>
Mailing Address 709 S D Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">             316.88           </div>
City Lake Worth	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340474

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">             633.76           </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">             _____           </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">             _____           </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 200 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sandy Hector</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 4330 Village Drive #B		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Delray	State FL	Zip Code 33445	Transaction ID : D340475
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Sandy Hector</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 4330 Village Drive #B		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Delray	State FL	Zip Code 33445	Transaction ID : D340476
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">633.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 201 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Tony Patterson</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1638 Bresee Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           316.88         </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340477

Full Name (Last, First, Middle Initial) of Payee <b>Tony Patterson</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1638 Bresee Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           316.88         </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340478

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         633.76       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 202 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Louis Porteous</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">316.88</span> </div>
City State Zip Code Stuart FL 34997	<b>Transaction ID : D340479</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">2759856.99</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Louis Porteous</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">316.88</span> </div>
City State Zip Code Stuart FL 34997	<b>Transaction ID : D340480</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">294216.97</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">633.76</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 203 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Brian Quillen</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 232 Parkwood Drive S		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340481

Full Name (Last, First, Middle Initial) of Payee <b>Brian Quillen</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 232 Parkwood Drive S		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340482

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">633.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 204 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Robert Richardson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           316.88         </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340483

Full Name (Last, First, Middle Initial) of Payee <b>Robert Richardson</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           316.88         </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294216.97</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340485

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">633.76</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Gihan Perera

[Electronically Filed]

Signature

 Date 

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 205 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Yettie Thompkins</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 414 Lincoln Rd.		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Cocoa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340486

Full Name (Last, First, Middle Initial) of Payee <b>Yettie Thompkins</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 414 Lincoln Rd.		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City Cocoa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340487

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">633.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 206 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>John Tracey</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2812 Genessee Ave		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>John Tracey</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 2812 Genessee Ave		Amount <span style="border: 1px solid black; padding: 2px;">316.88</span>	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">633.76</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 207 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Frankisha Walker</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3414 34th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           316.88         </div>
City State Zip Code West Palm Beach FL 33407	Transaction ID : <b>D340491</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           2759856.99         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Frankisha Walker</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 3414 34th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           316.88         </div>
City State Zip Code West Palm Beach FL 33407	Transaction ID : <b>D340492</b>	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">           294216.97         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">633.76</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 208 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Muslim Ali</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6513 Yellow Hammer Ave		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340493

Full Name (Last, First, Middle Initial) of Payee <b>Muslim Ali</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6513 Yellow Hammer Ave		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340494

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 209 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Khaim Jack Cousineau</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           418.28         </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759856.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340495

Full Name (Last, First, Middle Initial) of Payee <b>Khaim Jack Cousineau</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 16 / 2012         </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           418.28         </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294216.97</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340496

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 210 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Alissah Depiro</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 3721 Mission Court		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Largo	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Alissah Depiro</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 3721 Mission Court		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Largo	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 211 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Savanah Goodland</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City	State	Zip Code	Transaction ID : D340499
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Savanah Goodland</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City	State	Zip Code	Transaction ID : D340500
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

Full Name (Last, First, Middle Initial) of Payee <b>Sarah Hagemen</b>		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 6341 Halifax Drive		Amount 418.28	
City New Port Richey	State FL	Zip Code 34653	Transaction ID : D340502
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought	294216.97	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) _____	<input checked="" type="checkbox"/> General

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	836.56
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 213 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Jefferson</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 8515 River Drive		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33615	Transaction ID : D340503
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Charles Jefferson</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 8515 River Drive		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33615	Transaction ID : D340504
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 214 OF 222  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Juges</b>		Date <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>
Mailing Address 2326 E 111 Avenue		Amount <span style="border:1px solid black; padding:2px;">418.28</span>
City Tampa	State FL	
Zip Code 33612	Transaction ID : D340505	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border:1px solid black; padding:2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Juges</b>		Date <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>
Mailing Address 2326 E 111 Avenue		Amount <span style="border:1px solid black; padding:2px;">418.28</span>
City Tampa	State FL	
Zip Code 33612	Transaction ID : D340507	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <span style="border:1px solid black; padding:2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<span style="border:1px solid black; padding:2px;">836.56</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"></span>
(c) TOTAL Independent Expenditures.....	<span style="border:1px solid black; padding:2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 215 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6372 Raleigh Street Apt 1904		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Obas</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6372 Raleigh Street Apt 1904		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 216 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Hiondy Polanco</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>	
Mailing Address 2326 E 111 Avenue		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33612	<b>Transaction ID : D340510</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>			

Full Name (Last, First, Middle Initial) of Payee <b>Hiondy Polanco</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2012</b>	
Mailing Address 2326 E 111 Avenue		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33612	<b>Transaction ID : D340511</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 217 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Romero</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1101 Arboleda Court		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Jonathan Romero</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 1101 Arboleda Court		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 218 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Mable Smith</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 4203 Arch		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Tampa	State FL	
Zip Code 33607	Transaction ID : D340514	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Mable Smith</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 4203 Arch		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Tampa	State FL	
Zip Code 33607	Transaction ID : D340515	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 219 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Karla Taylor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 1009 S Bayshore Blvd #202		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Safety Harbor	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340516</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Karla Taylor</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 1009 S Bayshore Blvd #202		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>
City Safety Harbor	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : <b>D340517</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 220 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00521013       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Sadye Vassil</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 355 8 Avenue #9H		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City New York	State NY		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Sadye Vassil</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 355 8 Avenue #9H		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City New York	State NY		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 221 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Brandon Williams</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6720 S Lois Avenue Apt 8102		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33616	Transaction ID : D340521
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Brandon Williams</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012	
Mailing Address 6720 S Lois Avenue Apt 8102		Amount <span style="border: 1px solid black; padding: 2px;">418.28</span>	
City Tampa	State FL	Zip Code 33616	Transaction ID : D340522
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">836.56</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 222 OF 222  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Florida Freedom PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00521013         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>Nathan Williams</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6720 S Lois Avenue		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2759856.99</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D340523

Full Name (Last, First, Middle Initial) of Payee <b>Nathan Williams</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>            10 / 16 / 2012         </div>
Mailing Address 6720 S Lois Avenue		Amount <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">418.28</span> </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">294216.97</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D340524

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">836.56</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;"></span> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">1424425.97</span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012